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Project Executive Summary

The State of North Dakota and the Department of Human Services is committed to integrating a Medicaid Working Disabled program and an SCHIP program into the Vision computer system. We are also committed to making this system a better tool to help workers do their jobs and serve our customers more efficiently.

The Primary business sponsor of this is Blaine Nordwall, the Director of the Economic Assistance Policy Division. The technology sponsor is Roger Hertz, the Director of the Division of Information Technology.

This project plan is for the time period of July 1, 2003 through June 30, 2005 and will consist of two phases.

The first phase is to provide a process by which we can add integration for the Medicaid Working Disabled program into the Vision computer system. The North Dakota Legislature authorized the establishment of a Medicaid Working Disabled program for individuals who are disabled, who are at least eighteen but less than sixty-five years of age and who are gainfully employed. Individuals meeting this criteria can Buy-In to the Medicaid Program and thus have Medicaid coverage. These individuals must pay a one-time per lifetime enrollment fee plus a monthly premium.

The second phase is to integrate the Children's Health Insurance Program (CHIP) into the Vision computer system. The system will be used to determine eligibility for the CHIP program that will result in the payment of a premium by the MMIS system as it currently does. The system will accomplish the eligibility determination through the registration of clients for a case, recording of information concerning several aspects of non-financial eligibility, recording of financial information that will be used to determine financial eligibility for the CHIP program, recording of the authorization or denial of the case and reporting eligibility information to the MMIS system for payment purposes. In addition various reporting requirements will have to be fulfilled.

The ITD Estimate for development, design and implementation of the Medicaid Working Disabled phase is $224,736 and the estimate for the SCHIP phase is $365,008.   These projects will start July 1, 2003 and run until June 30, 2005.   In addition to the ITD costs, there are Economic Assistance, Medical Services, and DOIT staff costs that will be assessed against these projects. These will be further defined as the project details are defined and the information becomes available. The funding for this project will also be defined in detail at a later time.

Project Scope Management

Introduction

The current Vision system is a client server system that has been in operation since 1995.

The development of this project is a partnership between the Federal Government, the State Office of Economic Assistance, the Medical Services Division, the Division of Information Technology and the Information Technology Department.

The Vision computer system is the primary tool for the State of North Dakota, Divisions of Economic Assistance and Medical Services, to work with and provide service to their customers.

Project Mission

To design, develop, install, implement, and maintain the Vision computer system for the Department of Human Services. We must be able to meet Federal and State requirements. We must also be able to provide a tool for workers to be able to effectively and efficiently perform their job duties. We must be able to respond to our customers needs in a more efficient and effective manner.

Project Overview

The Medicaid Working Disabled and SCHIP project consists of two phases

Each of the phases will have (as needed) phases for:

Planning
Analysis
Design
Development
Testing
Deployment
Project Management

Description of Project:

There are 2 phases within the Project plan and below is a description of each of them.

Medicaid Working Disabled

1. The following is a list of some of the changes that will need to be made to the Human Service systems in order to determine eligibility for the new Medicaid coverage type.   All existing Medically Needy technical and financial eligibility policies will apply to the new coverage type with the following exceptions and/or additional criteria.

- Vision will be changed to include a sunset date of 06-30-2005. (Which could be extended)
- A new Coverage Type for Medicaid will be created for the existing Coverage Group of Optional Categorically Needy.
- The new coverage will begin the first of the month following the month the determination of eligibility is made.
- Individuals eligible under this new Coverage Type must be age 18, but less than age 65 (not including month attaining age 65.)
- Vision will need the capability to indicate that an individual is considered disabled for this new Coverage Type, but when determining eligibility for other Medicaid Coverages, is not considered disabled. The individual may be eligible for this new coverage type if either the existing disability indicator, or the new indicator, is selected.
- Vision will need the capability to indicate an individual is considered gainfully employed.
- Individuals must disabled, at least age eighteen but less than sixty-five years of age and who are gainfully employed in order to be potentially eligible for this new Coverage. Vision will need the capability to indicate that an Individual can be eligible under this new Coverage Type versus remaining eligible under one of the other Medicaid Coverage Groups/Types. Individuals can be eligible for QMB and SLMB as well as this new Coverage Type. (QMB and SLMB eligibility is determined in TECS.)
- Vision will perform a gross income test that the client must pass before they can be eligible under this new Coverage Type. The gross income test considers the Families total gross income and must be less than 225% of the Federal Poverty Level. A Poverty Level 225% table will be required.
- Vision will need to add a new Column to the Financial Category Type Matrix to indicate what incomes are counted and what incomes are disregarded in determining eligibility for this new coverage.
- Vision will need the capability to compute the premium amount on a monthly basis. The premium amount will be a percentage of at least 2 ½%, but not more than 7 ½ % of the individual's gross income. A new table will be used in determining the premium amount (Premium will be based on a sliding fee scale).
- Vision will need to compute both a Medically Needy budget and the Medicaid Working Disabled Budget and store both on a Monthly basis.

- Asset Considerations will follow the Medically Needy Asset rules with one addition. The individual eligible under this new Coverage Type is allowed an additional disregard of assets up to $10,000 EARNED while an eligible individual is enrolled.
- A new Asset Type row will need to be added to the Asset Table of 'ME Buy-In Acct - Earned Income Only'. This new asset type can only disregard an amount that increases by the amount of earned income each month up to a maximum of $10,000. Thus the client will have a rolling asset disregard for this new Asset Type.
- If client becomes ineligible for new Coverage Type and is eligible under other Medicaid Coverages, the 'ME BUY-IN Acct-Earned Income Only asset is a countable asset for other Medicaid Coverages. It is also a countable asset for QMB or SLMB coverage if the individual is eligible for one of those coverages simultaneously with the new Medicaid Working Disabled coverage type. TECS will be changed to allow entry of the new asset type required for QMB or SLMB coverage. TECS will include the new asset type in the asset calculation for QMB or SLMB.
- If client re-establishes eligibility under the new Coverage Type after being ineligible for a period, the amount of Asset that was previously disregarded would still be disregarded and the Asset limit would again continue to increase based on EARNED income.
- Prior to authorization of eligibility under this new Coverage Type, the individual is required to pay a one-time per lifetime $100.00 Enrollment Fee and the first monthly premium. Vision will need to identify if the one-time per lifetime $100.00 Enrollment Fee has been paid. Vision will also need to maintain this information, even if the case closes for three years and is purged (and the individual is still under age 65), in case the individual reapplies later.
- A new window will be created to track the Monthly Premium amounts, payments and payment dates.
- The Program Case Manager will be responsible for collecting the $100.00 Enrollment Fee and the first monthly premium and must be able to indicate the collection of those in the system, prior to the system allowing this new coverage type to be authorized.
- When a premium is received and entered, it must be applied to the oldest unpaid month. Subsequent premiums will likely be entered by someone other than the eligibility worker. Some type of interface with Vision will be needed to allow someone other than an eligibility worker to enter premium payments.
- Once the premium amount is calculated and authorized (Notice is in History), the premium amount cannot be changed/recalculated. Help Desk will need the capability to unauthorize.
- When adding individuals to a case retroactively, changes to the premium amount cannot be changed/recalculated.
- Failure of the client to pay premiums for three consecutive months will result in termination of enrollment of this Coverage Type. (Client could continue eligible for Medicaid under another Coverage Type.)

- If the client appeals the termination of enrollment, Vision needs the capability to continue coverage even though a premium has not been paid for more than 3 months.
- If there is a break in this Buy-In Coverage Type and client reapplies – before eligibility can be re-established, the client will need to pay all prior months of premiums due and the first premium of the current period of eligibility. This would need to be indicated in the system prior to the system allowing the new period of coverage to be authorized. The eligibility worker will likely need the capability to indicate that these past premiums are paid at the point of re-application.
- After initial Month of Approval for this new Coverage Type, upon authorization of the future month, Vision will need the capability to automatically send a bill and return envelope to the client informing them of their Monthly Premium Due. The notices will have to pull in sub forms indicating the month, or months, for which the premium is due. The return envelope processing is not included in this estimate (per conversation with Terry Focke.) This would be handle by Central Duplicating.
- Vision need to add an automatic notice that can be sent to the client informing them of the termination of their enrollment. (The case may not necessarily close and client could be eligible under Medically Needy coverage with a Recipient Liability.
- Enhance the interface between TECS and Vision that generates alerts in Vision during the COLA run, to include updating the income amount. (The hours and cost of the Cost Estimate from Work Request #842530 has been included in this estimate.)
- The Vision system will be enhanced to produce reports pertaining to the addition of the new Medicaid coverage. This estimate will allow for the generation of 5 reports.
- Vision will create up to 5 additional notices and 10 additional sub-forms to be pulled into the Approval, Denial and Closure Notices that address this new coverage.
- Vision will be enhanced to create up to 5 additional Reports and enhance all current reports to include this new Coverage Type.
- The current interface between Vision and MMIS and Vision and TECS will be enhanced to process this new Coverage Type.
- Medifax and Verify will be enhanced to process the new coverage type.
- The system will be enhanced allowing individuals eligible under this new Coverage Type to receive Medicaid ID Cards.
- Vision will be enhanced to create10 Additional Alerts.
- Vision will allow TPL information for individuals eligible under this new Coverage Type.
- Vision will ensure that individuals eligible under this new Coverage Type need to receive Re-determination of Eligibility and Change Report Forms the same as other Medicaid Coverage types do.

SCHIP

1. The following is a list of requirements necessary for the development
    of the CHIP program in Vision.

    • Vision is a knowledge based system, therefore, it needs to know the
      processing rules of Healthy Steps.

    • Healthy Steps pays an insurance premium to Nordian Mutual. There
      are no medical bills paid by the department.   Recoupments are
      handled through the natural program's recoupment screen. By
      entering a negative for the month it generates a recoupment that
      flows to the MMIS system and recouped through the payment process.

    • Currently, for Medicaid and TANF the system looks at the date that
      the person requested benefits and based on that date, eligibility
      would be determined. For Healthy Steps the date of eligibility is
      the month after eligibility is determined. For example: a Healthy
      Steps application is submitted today, February 27, eligibility is
      determined in March. The first month a child would be eligible for
      Healthy Steps is in April.

    • There are no opt out rules in Healthy Steps. A child is 'in' or
      ineligible.

    • Age: a child zero through age 18 is eligible for Healthy Steps at
      140% poverty level. A child is not eligible if they are currently
      receiving or are eligible for Medicaid with a zero liability.
      Eligibility ends the last day of the month the child turns age 19.

    • A newborn can be added to a current Healthy Steps case if a child in
      the same household is currently receiving Healthy Steps. These
      newborns are added effective the date of their birth.

    • Residence: a child must be a resident of North Dakota, same as
      Medicaid.

    • Relationships would be the same as in the Vision system.

    • Citizenship: the same criteria that is applied for Medicaid for
      citizenship applies for Healthy Steps except there are no
      verification requirements for US citizenship but verification is
      needed if they are not a US citizen.

    • Verifications: Healthy Steps only requires verification of income,
      all other Medicaid verification criteria is non-applicable such as
      age, citizenship, and identity.

- SSN is not a requirement for Healthy Steps. Dummy numbers are used in Healthy Steps in order to process the cases; this is important to note because for recipients of Medicaid this is a requirement and when the SSN are sent to Baltimore the Numident system informs the worker whether this is a verifiable number.

- Child Support: There are no requirements in Healthy Steps for information to be sent to child support.

- Living Arrangements: all household members are budgeted in the same budget unit no matter what their living arrangement with on exception. If they are in an IMD facility or are institutionalized, they are out.

- IMD: at the time of eligibility determination, a child who is residing in an IMD is not eligible for Healthy Steps. This does not apply if the child enters an IMD while receiving Healthy Steps; this is different for Medicaid.

- There are no disability or incapacity requirements in Healthy Steps.

- Asset: There is no asset test for Healthy Steps, there is for Medicaid.

- Income: self employed income is determined by the average net income after expenses based on the average of the previous three years of adjusted gross income.

- Disregarded Income: all disregarded income is the same as Medicaid but Healthy Steps also disregards all JTPA(WIA) funds, nonrecurring earned or unearned lump sum payments including inheritance monies, all student income no matter if they are attending school full-time or part-time.

- A $50 disregard of child support income and health insurance premiums are not an allowable income disregard.

- Determining household size: all household members are counted in the size of the household except children over the age of 21.

- A child is considered living independently when they are no longer living with their parent. There is no six month waiting period like there is in Medicaid.

- Budgeting: budgeting for which individual is in the same unit is the same for Medicaid except aged, blind, and disabled (SSI included) individuals are in the same unit.

- Income that is received weekly is average and multiplied by 4.3 to arrive at a monthly amount.

- Income that is received every other week is averaged and multiplied by 2.15 to arrive at a monthly amount.

- Deductions: only these deductions apply actual payroll taxes, mandatory retirement, and mandatory union dues or $90 whichever is greater; out of pocket child care expenses, court ordered child and spousal payments paid out of the home.

- Currently, the budget is completed on an excel worksheet. This information needs to be implemented in the Vision system.

- Healthy Steps does not require a PCP.

- If there is any health insurance for a child currently or in the last six months, the child is not eligible for Healthy Steps unless the health insurance was terminated due to the involuntary loss of employment, the health insurance coverage was terminated through no fault of the family member who had secured the coverage, or the health insurance was terminated by a household member who is actively engaged in farming in a county which is declared a disaster area. If the child gains access to health insurance, coverage ends.

- A child is not eligible for Healthy Steps if a member of the family has health benefits coverage under a state health benefits plan on the bases of a family member's employment with a public agency at no premium cost to the member.

- Processing: If a household does not provide sufficient information to process the case, the household is given 30 calendar days from the date the Department requests additional information in which to provide the requested information. If the information is not received within 45 days, the application is denied for failure to provide sufficient information.

- Reporting: Household report in the fourth and eighth month eligible period concerning any health insurance coverage or if the child left the household. This information can be reported verbally to the worker but the worker would need to end coverage within the 12 months if the child left the household, if the child has health insurance, or if the household requests that their case be closed.

- Renewal: A renewal must be completed annually, and must be completed by the 15th of the 12th month, therefore, a notice needs to be sent out informing the enrollee to renew. If sufficient information is not sent in to the worker, the coverage ends at the end of the re-certification period.

- There is no 10 day advance notice to close Healthy Steps.

- If the Department estimates that available funds are insufficient to allow for plan coverage for additional applicants, the Department may take any action appropriate to avoid commitment of funds in excess of available funds including denying applications and establishing waiting lists. A process would need to be included to limit new recipients for this requirement. It could be handled two ways. Notification by the Department not to add any new children without prior approval or a mechanism in the system that would allow the Department to put in number that would limit the premiums to be paid each month.

All processing that is completed in the natural system for Healthy Steps needs to be implemented in the Vision system.

Project Objectives

➢ To create uniform application of eligibility criteria across the service area
➢ Make it easier for applicants to apply for these services
➢ To have easier access to information by staff

Project Critical Success Factors

The success of this project will be based on the following factors:

➢ Data consistency/accuracy for reporting;
➢ Efficiency of the program;
➢ Project completion is within the budget;
➢ Assists in the planning process, budget planning and Legislative reporting needs;
➢ Easier access to data

Project Quality Management

The following will ensure quality of the system:

Throughout the development process and throughout the maintenance effort of the system, the department's staff and the contractor (ITD) will exercise appropriate safeguards to ensure the confidentiality of client data.

Specific state and federal regulations and procedures, and industry standards will be enforced regarding the security of the technical environment, the site, system programs and codes, emergency operations, and data backup at off site locations.

It is the Department's intent to complete prior reviews of various plans and schedules to determine their adequacy for successful and timely completion of all responsibilities critical to the success of this development.

Testing of the system will ensure that all areas meet all state and Federal requirements, and fully support the Divisions of Economic Assistance and Medical Services policy and management needs.

Required Assurances

The State of North Dakota agrees to the following provisions:

➢ Copies of progress reports, as requested, will be delivered to all Federal agencies.
➢ The State will own any written material that is designed, developed, installed, or improved with enhanced FFP.
➢ DHS will have a royalty-free, non-exclusive, and irrevocable license to reproduce, publish, or otherwise use and authorize others to use, for federal government purposes, any written material that is designed, developed, installed, or improved with enhanced FFP.
➢ The contracted services for the period of time specified in the Plan approved, or for any shorter period of time that is determined, justifies the federal funds invested.
➢ The information in the system will be safeguarded in accordance with all state and federal requirements.

Penalties

This was mandated by the State Legislature. The law takes effect on August 1, 2003. We need to have this project done as soon as we can.

Accuracy

Errors identified by the State in any reports, in the software system or in the data presented will be corrected by the Information Technology Department within a time period agreed upon by all parties upon written notification by the Division of Information Technology.

Reports

Reports to be supplied by the Information Technology Department shall be delivered within a time period agreed upon by all parties and in a format mutually agreed upon by both parties.

User/Technical Support

The Information Technology Department agrees to provide a response to a user inquiry by the end of the business day following the day the inquiry is received. Response to an inquiry that requires research shall be provided within seven (7) calendar days of receipt of the inquiry.

Project Time Management

The tracking of time for this project will be measured by recording the time spent working on the project by staff members per month.

Costs will be charged to the Grant Number issued to this Project. All salaries will be charged to their original cost center code as listed below.

Project Team Cost Center Code Allocation

Name	Cost Center Code	Department
Terry Focke	0675	DOIT
Dale Emerson	0675	DOIT
Curtis Volesky	0675	EA
Karen Cossette	0675	DOIT
Brenda Peterson	0675	EA
Maggie Anderson	0675	Medical Services
Annette Moos	0675	Medical Services
Arlene Holtz	0675	EA
Blaine Nordwall	0675	EA
Roger Hertz	0675	DOIT
Karalee Adam	0675	DOIT
Doran Eberle	Billed through ITD billing	ITD
ITD Programmers	Billed through ITD billing	ITD
Karen Ibach	0675	EA
Regional Rep.	0675	EA
Barb Wieland	0675	EA
Dave Eckenrode	Billed through ITD Billing	ITD
Medical Services testers	0675	Medical Services
Brenda Haugen	Billed through ITD billing	ITD
Dan Sweep	Billed through ITD billing	ITD

Department of Human Services time will be tracked using the time sheet that is being used by the department today.

Time Report for Project Work

Time reporting will be kept on the standard reporting forms used by the Department of Human Services.

Project Cost Management

This section includes details of the costs and benefits to the State. This section includes a summary of expected savings and expected costs and concludes with an estimate of federal and state cost allocations and a statement of the expected period of life of the system.

The total amount approved for IT costs, from the Legislature to DOIT, for the biennium 2003-2005 for this project is $769,741. This is broken down as $250,000 for the Buyin part of the project and $519,741 for the SCHIP

part. The costs below are projected for the time period July 1, 2003 through June 30, 2005. This includes all information technology costs charged to us by ITD.

Estimated Project Costs are displayed below in Chart A

Chart A – Estimated Total Project Costs

Description	Costs
ITD Costs	**$599,744**
Staff costs	**204,690**
DOIT Staff Costs	**61,539**
Total Project Costs	**$865,973**

Cost Benefit Analysis and Proposed Budget

Primary Benefits

There are several benefits anticipated out of this Project.   Some of which are:

➢ Creating Medicaid Working Disabled and SCHIP in Vision will result in consistent, uniform application of eligibility criteria across the service area
➢ This would simplify the process
➢ Would allow easier access for recipients to apply for these services
➢ More and easier access to information by our staff

Costs

The costs for the development projects are broken down in two parts. They are:

➢ Design, development, and implementation costs; and
➢ Operational costs

The Vision computer system has been designed and written by the State of North Dakota and the State will continue to be the owner of all data on this system.   The State will also ensure there are sufficient safeguards to be able to maintain this system on an ongoing basis.

Chart B – Total Project Costs

The costs are projected to be as follows:

Staff (Development) -- The staff maintain time studies to determine whether their time should be charged to the development project or their normal cost center. Based on these time studies, we know that roughly up to 7 members of the DHS staff are involved in development activities at all times. In addition 1 staff member from the Department of Human Services Division of Information Technology (DOIT) is directly charged to the Development cost center. Staff Development costs are charged to regular funding. The monthly costs for salaries, rent, telephone and travel attributed to the Development cost center come to approximately $266,229.

Information Technology Department (Development) -- ITD has provided some estimates on their costs for developing the new project and the phases. To date, the best estimates for all the phases are as follows:

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     Medicaid Working Disabled
$224,736
     SCHIP                                        365,008

                                  TOTAL           599,744
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Thus the estimated total costs for development for the time period from July 1, 2003 through June 1, 2005 comes to:

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     DOIT Staff Costs                      $61,539
     DHS EA Staff                          $204,690
     Information Technology Department     $599,744

                             TOTAL         $865,973
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Cost Benefit Analysis

Estimate of Federal and State Cost Allocations

ITD Estimates for development, design and implementation of this project are $599,744.   This project will start July 2003 and run through June 2005.   These costs are for the Information Technology Department's (ITD) costs only. In addition to the ITD costs, there are staff costs of $204,690 for the time period. There are also DOIT staff time costs of $61,539 for the time period. The total estimated costs for development and staff time are $865,973.   The funding for this project is based on 50% FFP.

The state legislature funded this project at $769,741 for the biennium for data processing costs.

Statement of Expected Period of System Life

This system should have an expected life of at least ten years.

Cost Control

The total amount of the Information Technology funding for this project for the biennium is not to exceed $769,741.   The actual amounts will be tracked monthly based on the ITD billing system and the DHS accounting system.
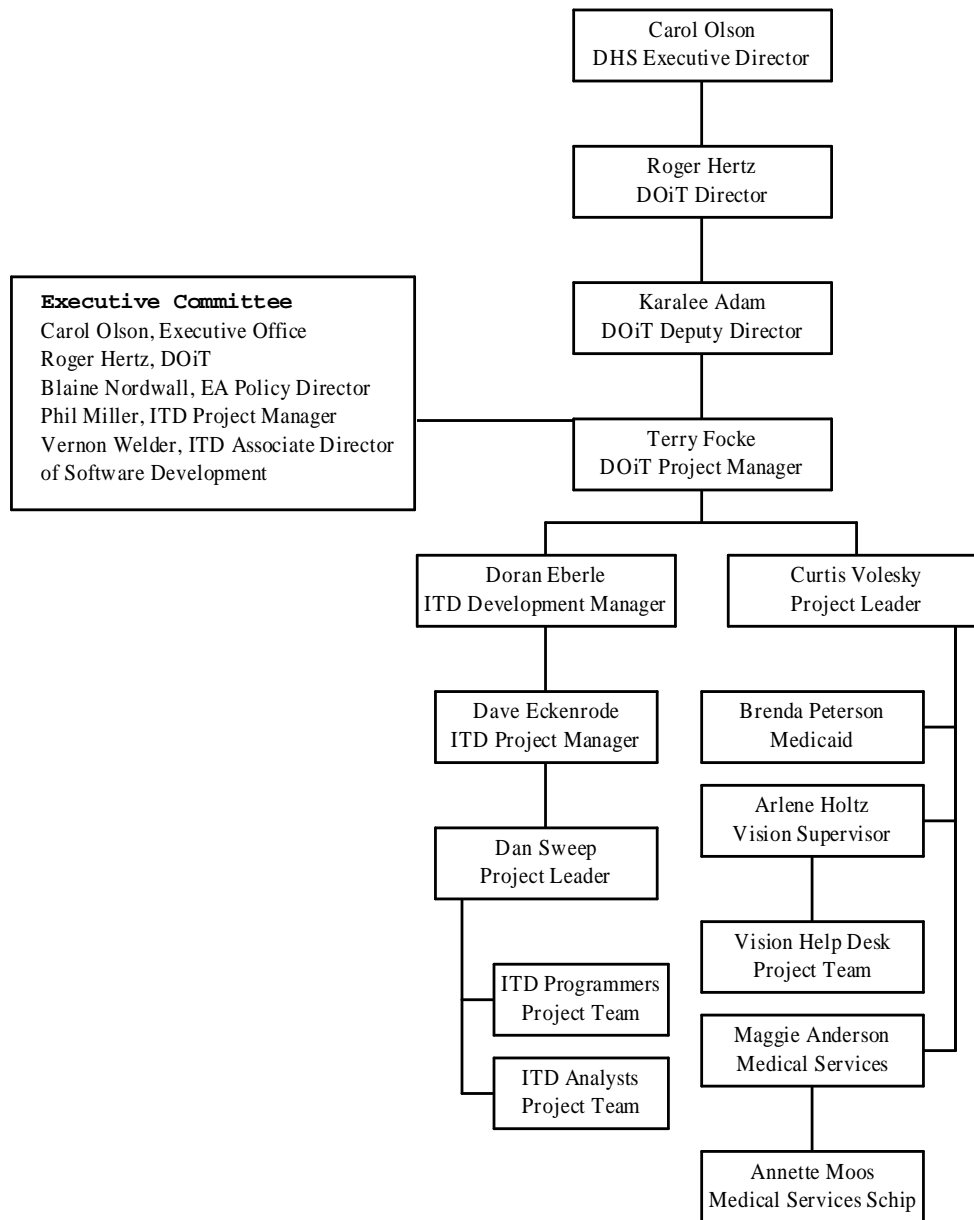
Project Human Resource Management
Project Team

	Name	Department	Program	Phone #	Email
PM	Terry Focke	DOIT	Proj Manager	87519	Sofoct@state.nd.us
PM	Dave Eckenrode	ITS	Proj Management	87388	deckenrode@state.nd.us
PT	Karen Ibach	EA	Vision staff	85422	
PT	Karen Cossette	DOIT	DOIT Development	86068	Socosk@state.nd.us
EC	Blaine Nordwall	EA	Director	84058	sonorb@state.nd.us
EC	Roger Hertz	DOIT	Director	82570	Soherr@state.nd.us
EC	Karalee Adam	DOIT	Development Manager	82051	Soadak@state.nd.us
PT	Arlene Holtz	EA	VISION Supervisor	85412	sohola@state.nd.us
PT	Brenda Haugen	ITD	Programming	86564	Bhaugen@state.nd.us
PT	Doran Eberle	ITD	ITD Manager	85401	Deberle@state.nd.us
PL	Curtis Volesky	EA	Medicaid Eligibility	82110	sovolc@state.nd.us
PT	Maggie Anderson	Medical Services	Medical Services Asst Director	81603	soandm@state.nd.us
PT	ITD Programmers	ITD	Programming	86564	
PT	DHS Testers	Medical services	Medical Services		
PT	Brenda Peterson	EA	Medicaid Eligibility	81065	sopetb@state.nd.us
PT	Dale Emerson	DOIT	DOIT Development	87521	soemed@state.nd.us
PT	Annette Moos	Medical Services	Chip	84019	somooa@state.nd.us
PT	Regional Rep	EA	Regional Representative		
PT	Barb Wieland	EA	Vision Help Desk	86080	sowieb@state.nd.us
PL	Dan Sweep	ITD	Analyst-ITD	87443	dsweep@state.nd.us

Legend
EC: Executive Committee
DM: DOH Data Manager
PM: Project Manager
PL: Project Leader
PT: Project Team

Buy-In and SCHIP Organizational Project Chart

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                            ┌─────────────────────────┐
                            │      Carol Olson         │
                            │  DHS Executive Director  │
                            └─────────────────────────┘
                                        │
                            ┌─────────────────────────┐
                            │      Roger Hertz         │
                            │     DOiT Director        │
                            └─────────────────────────┘
                                        │
┌──────────────────────────────┐   ┌─────────────────────────┐
│  Executive Committee          │   │     Karalee Adam         │
│  Carol Olson, Executive Office│   │  DOiT Deputy Director    │
│  Roger Hertz, DOiT            │   └─────────────────────────┘
│  Blaine Nordwall, EA Policy   │                │
│  Director                     │   ┌─────────────────────────┐
│  Phil Miller, ITD Project     │───│      Terry Focke         │
│  Manager                      │   │  DOiT Project Manager    │
│  Vernon Welder, ITD Associate │   └─────────────────────────┘
│  Director of Software         │
│  Development                  │
└──────────────────────────────┘
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Doran Eberle ITD Development Manager	Curtis Volesky Project Leader
Dave Eckenrode ITD Project Manager	Brenda Peterson Medicaid
Dan Sweep Project Leader	Arlene Holtz Vision Supervisor
ITD Programmers Project Team	Vision Help Desk Project Team
ITD Analysts Project Team	Maggie Anderson Medical Services
	Annette Moos Medical Services Schip

Project Resources

The utilization of these staff will be required during various phases of the implementation process, beginning in July 2003. The staff position, number of staff involved, and percentage of each person's time are shown below in Chart C.

Chart C – Project Resource Time Allocation

- Project Manager   1   75%
- Project Leaders   2   100%
- Policy Staff   1   100%
- Testing ___   4   25%
- ITD Analysts   4   80%
- ITD Programmers   5   80%
- Project Team   11   30%

The total staff costs for these state DHS staff activities are projected to be $22,185 per month. ITD staff will be billed actual costs through the ITD Billing system.

Staff Funding Allocation

A portion of the staff dedicated to work on the project and the system implementation is already funded at 50 percent FFP. DHS will maintain records that detail staff activities during this period to support claims FFP.

Project Team Responsibilities

Executive Committee Responsibilities

The Executive Committee ensure that progress is being made on the Master Project Plan and on any Sub-Project Plan(s), that milestones and deliverable dates are being met, and that resource hours and costs are within the established budget.

The Committee will take action when any of the following occur:

➢ Progress is delayed at any level on the Master Project Plan or on any Sub-Project Plan(s).

➢ Milestones or delivery dates are delayed beyond two weeks.

➢ Resource hours and costs exceed the established budget parameters.

Project Manager Responsibilities

This outline identifies the Project Manager's responsibilities in managing the development and communication of the Master Project Plan to Senior Executives, the Project Team, and the Planning Team.

➢ Plan and structure the Master Project in cooperation with Economic Assistance and Medical Services and ITD and DOIT.

➢ Collaborate with the Senior Executives, the Project Leaders, and their Assistants to develop the Project goals, functional requirements, milestones/objectives, and establish available resources and their skill levels for the Project.

➢ Estimate the time-span of the Master Project Plan and the Sub-Project Plans with the help of the Project Team members and the Senior Executives.

➢ Define the skills and competencies needed to meet Project requirements and the Project scope.

➢ Obtain additional resources for the Project when required.

➢ Negotiate the Project resource budget with Senior Executives and Management.

➢ Is a role model by showing enthusiasm and dedication towards the Master Project Plan and Sub-Project Plans. Be able to identify and resolve conflicts between project priorities and daily priorities.

➢ Integrate the efforts of all Functional Departments. Negotiate with the Project Leaders, Contractors, and Senior Executives.

➢ Develop a scheduling team to use Microsoft Project 2000 to manage the Project successfully.

➢ Will update and publish the master project plan as needed.

➢ Assign task relationships and resources to the master project plan.

➢ Review schedule and relationship conflicts with the master project plan.

➢ Report results to Project Team members, Senior Executives, etc.

➢ Identify problem areas and resource allocation problems that need to be resolved.

➢ Provide timely reports of the Project, problems, Project Resource Allocation problems, and other required documents.

➢ Attend Master Project Plan meetings as shown on the schedule included in this plan.

Project Leader Responsibilities

This outline identifies the Project Leader's responsibilities in managing the development and communication of the Master Project Plan to Senior Executives, the Project Team, and the Planning Team.

➢ Plan the Master and Sub-Project(s) for the project.

➢ Collaborate with the Project Leaders, and their Assistants to develop the Sub-Project goals, functional requirements, and milestones/objectives.

➢ Estimate time-span of the Sub-Project Plan(s) with the help of the Project Team members.

➢ Train skilled team members on Project Plan reporting.

➢ Assist with all of the Project Manager's functions as outlined under Project Manager.

➢ Coordinate the Project Scheduler's daily tasks.

➢ Coordinate desktop publishing documents and presentations.

➢ Assist with the documentation and publication of the Project Plan.

➢ Report results to the Project Manager and Project Team members.

➢ Identify Sub-Project Plan(s) problem areas that need to be resolved.

➢ Provide timely reports of the Sub-Project Plan(s), problems, and other required documents.

➢ Attend Master Project Plan meetings as shown on the schedule included in this plan.

Skilled Team Member Responsibilities

This outline identifies the Skilled Team Member's responsibilities:

➢ Deliver assigned tasks on the master project plan.

➢ Will always escalate any conflict of daily or project responsibilities.

➢ Will always report the possibility of a missed deadline to management.

➢ Is accountable for participating in the development of a thorough and accurate plan.

➢ Is always responsible for participating in the testing and sign off of the Project Plan Phases assigned to him/her.

➢ Report results to Project Team members, Project Manager and Project Leader.

➢ Identify problem areas, which need to be resolved.

➢ Provide timely reports of the Project, problems, and other required documents.

➢ Meet with Project Manager and Project Leader to view task progress at weekly Master Project Plan meetings as shown on the schedule included in this plan.

Project Communications Management Documentation Deliverables

Deliverables to the Executive Committee

The Project Manager will provide the following:

- ➢ DHS Project Plan
- ➢ Sign-Off Documents

Deliverables to the Project Team

The Project Manager and Project Leader will provide:

- ➢ Weekly Status Reports

Deliverables from ITD

ITD will provide the following:

- ➢ Cost Estimates;
- ➢ Statement of work;
- ➢ Analysis Document;
- ➢ Design Document;
- ➢ ITD's project plan and weekly progress;
- ➢ Sign-off documents.
- ➢ Weekly status reports

Deliverables to Federal Agencies

The Project Manager and Project Leader will provide the following:

- ➢ Copies of progress reports, will be delivered to Federal Agencies as needed.

Project Team Weekly Meeting Schedule

Type of Meeting	Who will be Attending	Day of Meeting	Time of Meeting	Place of Meeting
Weekly Status Meetings	Project Manager, Project Leaders, Karalee Adam, Blaine Nordwall, Doran Eberle, Project Team, ITD Project Team	To be determined	Undetermined	Undetermined
Meeting	DHS Project Team	As needed	Undetermined	Undetermined
Coordination Meeting	Project Leaders	As needed	Undetermined	Undetermined

Project Risk Management

The State of North Dakota will comply with all State and Federal security and interface requirements. Current State disaster recovery procedures and guidelines will be updated and in effect. ITD will be required to comply with these procedures and guidelines.

Project Safeguards

The Department's staff and ITD will exercise appropriate safeguards to ensure the confidentiality of client data and the integrity of operations of the Vision computer system.

Specific state and federal regulations and procedures, and industry standards will be enforced regarding the security of the technical environment, the site, system programs and codes, emergency operations, and data backup at off site locations.

Required Assurances

The State of North Dakota agrees to the following provisions:

The State will own any written material that is designed, developed, installed, or improved with enhanced FFP.

DHS will have a royalty-free, non-exclusive, and irrevocable license to reproduce, publish, or otherwise use and authorize others to use, for federal government purposes, any written material that is designed, developed, installed, or improved with enhanced FFP.

The contracted services for the period of time specified justifies the federal funds invested.

The information in the system will be safeguarded in accordance with all State and Federal requirements.

Project Management and Control

All progress will be tracked through the current payroll system. Project overall tracking will be tracked with the use of Microsoft Project 2000.

Progress Reporting Guidelines

To track progress the DHS project manager will want to have in place a weekly progress reporting process. This process will require the ITD project managers to produce status reports at least weekly that will be available electronically to DHS.

Issues Procedures

An issue is defined at any point at which an unsettled matter is ready for decision. It is necessary to identify the specific impact and/or alternative(s) of an issue. The impact could be to an application system, a workflow, a procedure, or equipment. Alternatives replace the current item or plan. The Department of Human Services and The Information Technology Department have separate reporting requirements for project issues.

Each item identified as an issue should be documented as follows:

Tracking Information

PROJECT	Enter the acronym of the application for which the issue was identified.
NUMBER ASSIGNED	Project Administration will assign a sequential number within each application to facilitate tracking.
ASSIGNED TO	Name of person who identified the issue.
STATUS	Current status of the issue. Options are:
	Research--issue has recently been identified and initial research is in process.
	Documented--issue research has been completed and is fully documented, including all alternatives and impacts. Team is in approval cycle.
	Approval--issue has been approved by the project team and is awaiting final management approval.
	Closed--issue has had final management approval and tasks have been scheduled to support implementation of the item.
DATE INITIATED	Date the issue was originated.
DUE DATE	Date the next action is expected on this item.
LAST UPDATE	Date the issue documentation or status was last updated.

Issues Narrative

Description
This is a description of the issue that has been identified. It should describe the situation as it exists today and what the situation would be under the proposed system or function. A specific statement should be made about what problem or difference this causes (it may not be readily apparent to the reader).

Identify Specific Issues
If the issue is unique because of the project environment, it should be noted here.

Alternatives and Impacts
This section is to describe all alternatives that could be considered and the impact of selecting that alternative. These impacts could be either modifications to a system, procedural change, customer impact, or financial ramifications.

Recommendations
This is a statement of the recommendation for implementing one of the alternatives and a description of why that alternative was selected.

Action Required for Closure
Description of the tasks or actions that must occur so that research and documentation can progress and a final decision can be made for selecting the most viable alternative. This description can change during the time the issue is open, but should always identify the next action required.

Approvals
All signatures appropriate for sign-off on the recommendation are to appear in this section.

The issues will be reported through the use of a lotus notes database. The format is to be followed for documenting all issues.

Change Order Request Procedures

It is inevitable in any project plan to not have a Change Order Request (COR). The change usually is determined after the baseline is set for the project plan, which means the change needs to be incorporated during the management and reporting phases.

Therefore, it is very important to determine if the COR will impact the project. These change orders will be recorded and signed off on through the use of a lotus notes database.

The people requesting the change order will also have to commit, in writing, to acceptance of the responsibilities for the additional charges and delays.

Project Approval Forms

Project Approval Form

North Dakota Department of Human Services/DOIT
SFN 1167 (Revised 1/3/2000)

This form signifies that DHS Management and parties involved in this
project plan are in agreement with the Project Plan as described in this
document.

Signatures:

_____
Roger D. Hertz, DOIT Director   Date

_____
Blaine Nordwall, Economic Assistance Policy Division Director   Date

_____
Carol K. Olson, DHS Executive Director   Date

Project Completion Approval Form

North Dakota Department of Human Services/DOIT
SFN 1168 (Revised 1/3/2000)

This form signifies that DHS Management and parties involved in this project plan are in agreement with the Completion of the Project Plan as described in this document.

Signatures:

Roger Hertz, Director, Division of Information Technology   Date

---

Blaine Nordwall, Director, Economic Assistance Policy Division   Date

---

Carol Olson, Executive Director, Department of Human Services   Date

Appendix A
Medicaid Working Disabled Cost Estimate

OST / TIME ESTIMATE		#REF!
ORTH DAKOTA		
IFORMATION TECHNOLOGY DEPARTMENT		#REF!
FN 2636 (03-98) ISD 60		
o:		From:
	Arlene Holtz	
	Department of Human Services	Prepared By:
roject:	Add new Medicaid Working Disabled program to Vision	
TD Request Number:		842712	Department Request N

NE-TIME COSTS		
evelopment		
YSTEMS DEVELOPMENT		$224,736.00
THER (Specify)		$0.00
	TOTAL:	$224,736.00

IME FRAME	
stimated number of Months to complete project	
	7.00

hese estimated totals are based on the information we received during review process
and are intended for budgeting purposes only. Estimates can vary from actual cost
ecause of additional requirements or changes. A revised cost estimate will be issued
there are significant changes during development. Should you decide to proceed
ith this project, please sign and date this form and RETURN A COPY to ITD with a
ata Processing Work Request (SFN 2066) specifying the charge code to be used and
uthorization to proceed with the project. All ITD services relating to this project will
e billed to your department monthly at actual cost.

Appendix B
SCHIP Cost Estimate

OST / TIME ESTIMATE		Original	Date:
ORTH DAKOTA			3/15/2002
IFORMATION TECHNOLOGY DEPARTMENT		x Revised	Prior Est. Date
FN 2636 (03-98) ISD 60			2/28/2001

o:	From:
Judy Kadrmas	Doran Eberle
Department of Human Services	Prepared By:
	Roger Wetzel

roject:	Add CHIP program eligibility and benefit payment to Vision		
TD Request Number:		841307	Department Request Number:

ONE-TIME COSTS Development		ON-GOING MONTHLY COSTS Batch/Interactive Processing	
YSTEMS DEVELOPMENT	$365,008.00	DATA INPUT	
		SYSTEMS/PROGRAMING	
THER (Specify)	$0.00	CPU TIME	
		PRINTING	
		DISK STORAGE	
		TAPE COSTS	
		OTHER ADDITIONAL DEVICE ACCESS CHG	
TOTAL:	$365,008.00		$0.

TIME FRAME	
stimated number of Months to complete project	
	5.00

hese estimated totals are based on the information we received during review process
nd are intended for budgeting purposes only. Estimates can vary from actual cost
ecause of additional requirements or changes. A revised cost estimate will be issued
 there are significant changes during development. Should you decide to proceed
 ith this project, please sign and date this form and RETURN A COPY to ITD with a
 ata Processing Work Request (SFN 2066) specifying the charge code to be used and
 uthorization to proceed with the project. All ITD services relating to this project will
 e billed to your department monthly at actual cost.

Appendix C– ACRONYM GLOSSARY
System Acronyms

Program	Acronym	Name	Description
Medical Services & Medicaid	ITD	Information Technology Department	State of North Dakota's information systems department
	FFP	Federal Financial Participation	% of state dollars to obtain federal funding
	TEEM/VISION		Computer system that determines Medicaid eligibility for TANF

GHANTT CHART